

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>03/13/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>48</i>	<i>3/15/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>10203</i>	<i>5 4</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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